

OAHU COMMITTEES  
SUBMIT 1 ORIGINAL AND 1 COPY  
NEIGHBOR ISLAND COMMITTEES  
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STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
DISCLOSURE REPORT  
NONCANDIDATE COMMITTEE

LATE COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR NONCANDIDATE COMMITTEES.")

SECTION I-NONCANDIDATE COMMITTEE:

(a) Committee Name:

DKH Hawaii Leasing, LLC

(b) Mailing Address: 44-313 Kaneohe Bay Drive

Kaneohe, HI 96744

(c) Phone (Bus) 254-4504 (Res) 254-4504

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☒ Preliminary Primary ☐ Amended  
☐ Final Primary ☐ Short Form

☐ Preliminary General ☐ Final Election Period  
☐ Supplemental  
REPORTING PERIOD  
1/1/2006 through 9/8/2006

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS  
(Complete Section III (Part 2) on the Second Half of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period (Continuing Committee) OR at the time the Organizational Report was Filed (New Committee).....		0.00
2. Cash on Hand at the Beginning of this Reporting Period.....	0.00	
3. Total Receipts (From Line 11, Column A and B).....	0.00	0.00
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	0.00	0.00
5. Total Disbursements (From Line 14, Column A and B).....	0.00	8,000.00
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	0.00	0.00

SECTION III (Part 2)-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS  
(If Necessary, Complete Schedules A through D Before Completing This Section)

RECEIPTS

7. Monetary Contributions of \$100 or Less.....	0.00	0.00
8. Non-Monetary Contributions of \$100 or Less.....	0.00	0.00
9. Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A).....	0.00	0.00
10. Other Receipts (Schedule D, Line 2 for Column A).....	0.00	0.00
11. Total Receipts (Add Lines 7 through 10 for Columns A and B).....	0.00	0.00

DISBURSEMENTS

12. Contributions To Candidates (Schedule B, Line 2 for Column A).....	0.00	8,000.00
13. Expenditures (Schedule C, Line 2 for Column A).....	0.00	0.00
14. Total Disbursements (Add Lines 12 and 13 for Columns A and B).....	0.00	8,000.00

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Committee Chairperson Signature Norma May Hayler Date 10-4-06 Treasurer Signature Norma May Hayler Date 10-4-06  
Form NC-3 (Rev. 11/97)

**STATE OF HAWAII**  
**CAMPAIGN SPENDING COMMISSION**  
**SCHEDULE B**  
**CONTRIBUTIONS TO CANDIDATES**  
**NONCANDIDATE COMMITTEE**

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NONCANDIDATE COMMITTEE NAME: DKH Hawaii Leasing, LLC

PAGE 1 OF 1

DATE OF CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF CANDIDATE	AMOUNT OF CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	Linda Lingle Campaign Committee P.O. Box 25111 Honolulu, HI 96825	0.00	6,000.00
	The Hannemann Committee 98-1277 Kaahumanu Street, Box 418 Aiea, HI 96701	0.00	3,000.00

1. SUBTOTAL OF CONTRIBUTIONS TO CANDIDATES THIS PERIOD (THIS PAGE)..... 0.00
2. TOTAL OF CONTRIBUTIONS TO CANDIDATES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 12, COLUMN A)..... 0.00

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
SCHEDULE C  
EXPENDITURES  
NONCANDIDATE COMMITTEE**

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NONCANDIDATE COMMITTEE NAME: DKH Hawaii Leasing, LLC

PAGE 1 OF 1

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 0.00
2. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 13,  
COLUMN A)..... 0.00

**STATE OF HAWAII**  
**CAMPAIGN SPENDING COMMISSION**  
**SCHEDULE D**  
**OTHER RECEIPTS**  
**NONCANDIDATE COMMITTEE**

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NONCANDIDATE COMMITTEE NAME: DKH Hawaii Leasing, LLC

PAGE 1.00 OF 1.00

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE

1. SUBTOTAL OF OTHER RECEIPTS THIS PERIOD (THIS PAGE)..... 0.00

2. TOTAL OF OTHER RECEIPTS THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 10, COLUMN A)..... 0.00